



*Quality is Our Bottom Line*

**Insurance Committee Public Hearing**

**Thursday, March 15, 2012**

**Connecticut Association of Health Plans**

**Testimony in Opposition to**

**HB 5486 AAC Health Insurance Coverage for Prescription Drugs and Breast Thermography**

The Connecticut Association of Health Plans respectfully urges the Committee's rejection of HB 5486 AAC Health Insurance Coverage for Prescription Drugs and Breast Thermography.

With respect to the provisions of the bill that would limit out of pocket maximums for prescription drugs, including specialty drugs, to \$1,000 for individual and \$2,000 for a family, except for high deductible plans, we ask that the committee please consider the obvious cost implications of the provision and the fact that pharmacy coverage is not a mandated benefit in Connecticut and making it more costly may cause employers to drop coverage all together.

Furthermore, the new provision conflicts with federal health care reform. PPACA requires that plans meet certain tier/metal levels. The levels of coverage are defined by actuarial value. The covered services and essential health benefits will be defined by CMS and the state. Insurers will cover the same package of essential benefits. Deductibles and out of pocket maximums can vary. To the extent you restrict cost sharing it becomes much more difficult for plans to meet the metal level requirements which could have a serious detrimental effect on implementing a successful Exchange. We would strongly urge that the committee await further guidance on essential health benefits before moving in this direction – as this provision may likely be considered a new mandate subjecting the state to additional costs.

Section 2 and 3 of the bill require mandated coverage for Thermography Screening. Again, we would point out the same concern with respect to new mandates and the state's liability for the associated costs under federal health care reform. However, in addition, please note the following reference taken off the American Cancer Society's website stating that:

**“Thermography has been around for many years, and some scientists are still trying to improve the technology to use it in breast imaging. But no study has yet shown that it is an effective screening tool for finding breast cancer early.”**

Mandating a benefit that has yet to be proven effective is ill advised and we would strongly urge the Committee’s rejection. Thank you for your consideration.

*American Cancer Society Website*

*Thermography (thermal imaging)*

Thermography is a way to measure and map the heat on the surface of the breast using a special heat-sensing camera. It is based on the idea that the temperature rises in areas with increased blood flow and metabolism, which could be a sign of a tumor.

Thermography has been around for many years, and some scientists are still trying to improve the technology to use it in breast imaging. But no study has yet shown that it is an effective screening tool for finding breast cancer early. It should not be used as a substitute for mammograms.

Newer versions of this test are better able to find very small temperature differences. They may prove to be more accurate than older versions, and are now being studied to find out if they might be useful in finding cancer.